

SOS: IMPLEMENTATION CONSIDERATIONS

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Workshop Goals

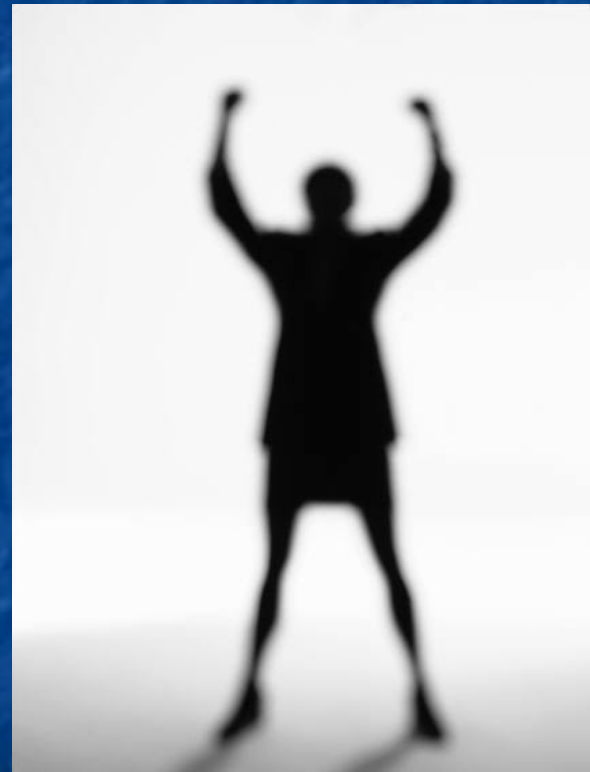
1. To learn your expectations/concerns
2. To discover what you are already doing/not doing (S.W.O.T)
3. To understand the importance of leadership and systemic change in this process
4. Best Practices for:
 - Implementation
 - Teacher Buy-In
 - Parent and Community Partnering
5. To see the program in the context of the ASCA National Model
6. To realize the importance of data
7. Evaluation

Things You Need to Know

- You are the **best** educators to implement this program.
- No program will eliminate suicide.
- SOS has the data that demonstrates that education *CAN* make a difference.
- Students want to talk about this and other adolescent issues.

What I Hope to Get out of This Program

- Find a piece of paper and list **one** expectation for this workshop and **one** implementation concern.



SOS REVIEW

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4-Pronged Strategy for Suicide Prevention

EDUCATION about Depression and Suicide

Video

Discussion

“Friends for Life”:

- Teaches the link between depression and suicide
- Emphasizes that depression is treatable
- Encourages help seeking

SCREENING for Symptoms of Depression and Suicide

BSAD: 7 item depression inventory

BEHAVIOR

- Acknowledge (the signs)
- Care (express concern)
- Tell (a trusted adult)

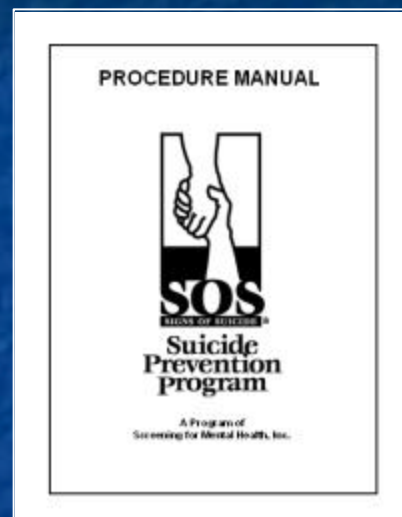
ENVIRONMENT

Parent Involvement - Parent version of screening form; letter, educational materials

Staff Involvement - Staff education and training video

Program Components

- Implementation Binder
- “*Friends for Life*” Video and discussion guide
- Depression Screening Forms for students and parents (English and Spanish)
- Staff Training Video
- Educational Materials for staff, parents and students
- Postvention Guidelines
- Self-injury resources for staff and parents
- Lecture for training staff and parents
- Customizable posters and wallet cards



SOS High School Suicide Prevention Program

Student Screening Form

1. Age: _____

2. Gender: ☐ Female ☐ Male

3. Grade in school: ☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ Other Program

4. When have you thought about the above?
☐ Often/Always ☐ Sometimes
☐ Never

5. Do you currently have suicidal thoughts?
☐ Yes ☐ No

Brief Screen for Adolescent Depression (BRADY)

These questions are about feelings that people experience when sad things happen that happen more often than the questions on above the SOS High School

Read each question carefully and answer it by checking the correct response.

1. In the last few weeks, has something happened that has made you feel sad or angry more often than usual?	Yes	No
2. Do you have less energy than you usually do?	Yes	No
3. Have you lost interest in things that you used to enjoy?	Yes	No
4. Do you think about death or killing yourself?	Yes	No
5. Have you noticed any changes in your eating or sleeping habits?	Yes	No
6. Have you noticed any changes in your thinking?	Yes	No
7. Do you feel sad or angry more often than usual?	Yes	No
8. Do you feel sad or angry more often than usual?	Yes	No
9. Do you feel sad or angry more often than usual?	Yes	No
10. Do you feel sad or angry more often than usual?	Yes	No

Additional questions regarding student use

1. In the past year, have you ever had thoughts of suicide?	Yes	No
2. In the past year, have you ever had thoughts of suicide?	Yes	No



SOS Goals

- ✓ Decrease the incidence of **depression, self-injury, suicide attempts**, and the number of youth who die by suicide
- ✓ Increase **knowledge** and **adaptive attitudes** about suicide and depression and how they are related
- ✓ Encourage individual **help-seeking**
- ✓ Link suicide and self-injury to mental illness that, like physical illnesses, require **treatment**
- ✓ **Address risk factors** for self-injury and suicide

SOS Goals (continued)

- ✓ Engage **parents** and school staff as **partners** in **prevention**
- ✓ **Reduce stigma** associated with mental health problems by integrating as topics for discussion in the health curriculum as conditions that are responsive to treatment
- ✓ Increase **self-efficacy** and **access** to mental health services for at-risk youth and their families
- ✓ Increase schools' capacity to form **community-based partnerships**

SOS is the only school based suicide prevention program to...

✓ Show a **reduction in suicide attempts** (by 40%) in a randomized-controlled study (screening form administered in classroom setting)

American Journal of Public Health, March, 2004

✓ Be selected by SAMHSA for its **National Registry of Evidence-Based Programs and Practices**

✓ *SOS has also documented dramatic increases in **help-seeking***

Adolescent and Family Health 2003

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Figuring out the *NOW*

- Evaluating what is happening in your school/community now.



Analysis of School/Community Context

S.W.O.T.

■ STRENGTHS

■ OPPORTUNITIES

■ WEAKNESSES

THREATS

Getting Department Buy-In

- Vision and Mission Statements
- Collaborative Leadership
- Change Issues



MISSION STATEMENT

- Based on beliefs, assumptions, and philosophy
- Establishes a structure
- Creates one vision and one voice
- Provides an anchor
- Student focused
- Indicate long-range results sought

Leaders need to be authentic,
have clarity of purpose and a
vision to inspire “followship”.

Robert Evans

Counselors and what they do are conspicuously missing from discussions of school reform initiatives. This omission is an enormous mistake, especially when counselors hold the keys to many students' dreams and aspirations. Counselors must be incorporated into school reform as leaders who are engaged in system-wide change to ensure student success.

Reese House, The Education Trust

LEADERSHIP AND SYSTEMIC CHANGE

- Administrative support is essential
- Participation in decision-making with school leaders
- Adequate funds/budget
- Expectations of obstacles and resistance to change

CHANGE ISSUES

During change it is important for the staff to feel continuity between the past and the future.

There is an “envelope of optimal realism” in the pace of change.

Senge

ASCA National Model



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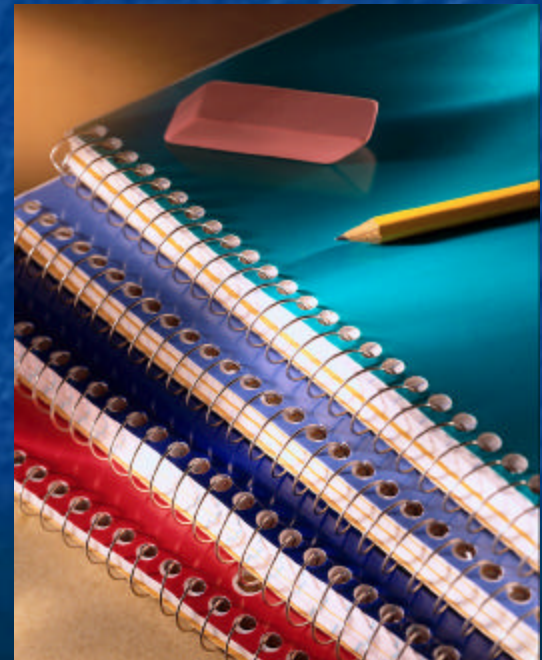
Where to Place the Program

- Thinking about developmental counseling programs



Counseling Programs

Are an integral part of the total school educational & health services program that is equal to & supportive of the academic mission of the school.



Counseling Programs

The philosophy that underlies developmental guidance and counseling programs is that all students (not just those in crisis) are in need of skills to effectively manage their lives & relationships with others if they are to become response-able citizens.



Counseling Programs

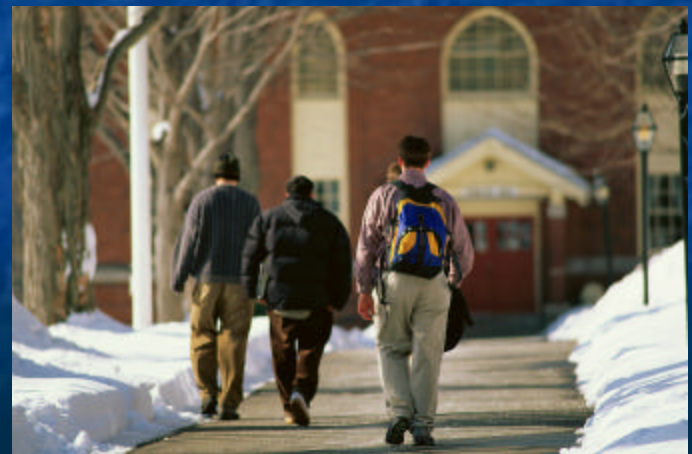
Are NOT an extracurricular activity. When we send for students important activities are taking place to enhance each student's educational career & personal development.



Counseling Programs

The majority of our students come to us:

- lacking proper adult guidance & support
- lacking the knowledge of steps/actions needed to prepare themselves for postsecondary educational programs, the world of work, or adult life.



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Counseling Programs

Function predominantly in a small group & large classroom guidance format versus a “services on demand” format. We are not waiting in our offices for you to send us students.

Our program is SCHEDULED, PLANNED, PROACTIVE, POSITIVE, IN-COURAGING, & I'M-POWERING



IMPLEMENTATION

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Getting Started

- Demonstrate the program to the administration to get their support
- Start small
- Involve the students
- Pilot-test

Security Issues and Handling Emergencies

- **Review school's emergency procedures and parental notification**
- **Identify who will handling emergencies, in advance**
- **Notify the nearest ER about the program in advance to facilitate referrals**

Implementation Overview

- **School personnel** implement the program with materials provided by SMH: School Psychologists, Health Educators, School Nurses, School Counselors, Student Assistance Professionals
- Usually implemented in **one classroom period**:
 - Students **view and discuss video** in classroom
 - Students **complete screening form** in classroom
- **Entire student body or a select portion** of student body may be screened (i.e. freshman) depending on the school's resources
- Screenings may be taken **with or without identification**
- Parent version of screening forms and information provided; assists in the identification of depression and suicidality and **helps initiate family discussion**
- **Passive or active parental permission**

Proposed Schedule

- Introduce Program
- Show video
- Facilitate discussion
- Students complete and score screening forms and Response Card
- Follow up with students requesting help

Screening Implementation Options

- Anonymous
- Anonymous with Response Card
- Non-anonymous
- Anonymous with number ID
- Eliminate

Note: Self-assessment is a critical tool in all personal/social programs.

Ensuring Follow Up

- Follow up with at-risk youth will vary
- Some schools provide evaluative and treatment services for students, while others will do an initial assessment and then refer at-risk youth to a community-based provider.

Ensuring Follow Up (continued)

- Respond to requests for help
- Set expectations about when follow-up can be expected
- Provide Referral Information
- Track students seeking help using the Student Follow-up Form provided

Planning for Referrals

- **Contact local mental health facilities and advise them of your program dates and times**
- **Verify referral procedures, wait lists, insurance details, etc.**
- **Create a Referral Resource List to send with parent letter**
- **Use SAMHSA's Find Treatment Locator to identify additional referral resources**

Decide on Format

- **Flexible model can be adapted to meet a school's needs**
- **Provide program school-wide or select target student group based on grade level, class enrollment, or special need**

Teacher/Community Buy In

Tips for School/Community Collaboration

Establish your in-school team

The program will become a part of the culture if it belongs to more than one person!

Meet with agency representatives

Allowing these agencies into the building educates and familiarizes students with their services and how to access them.

Staff Training

- Training faculty and staff is universally advocated and essential to a suicide prevention program.
- Research indicates that training faculty and staff can produce positive effects on an educator's knowledge attitudes, and referral practices.

-Doan, J., Roggenbaum, S., & Lazear, K., 2003

Staff Training Suggestions

- Show the *Friends for Life* video and facilitate a discussion
- Review the signs of depression and suicide
- Answer questions, dispel myths
- Review the school policy for handling students who disclose suicidal intent
- Review school and community mental health resources
- Review the Parent Screening form
- Distribute protocol for what to do when approached by students asking for help

Additional Considerations

- Time
- "Not my job"
- Pulling students out of class
- Substitutes and new teachers
- Support staff
- "Feed them" and offer professional development credit
- Train as "gatekeepers"
- Co-joint opportunities and training with students
- "Whine and cheese"

PARENTS

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Parents/Guardians as Partners in Prevention

- Studies have shown that as many as 86% of parents were unaware of their child's suicidal behavior.
- The percentage of parents who are involved in the student's activities is very small.

-Doan, et al, 2003

Parents/Guardians as Partners in Prevention

- By raising parental awareness, schools can partner with parents to watch for signs of these problems in their children and instill confidence for parents seeking help for their child, if needed.
- Involving parents may increase cooperation in prevention efforts and broaden community support

-Doan, et al, 2003

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Communication with Parents/Guardians

- **Send parents a letter stating the goals of the program (template provided) and Parent Screening Form (reproduce Spanish materials, if needed)**
- **Encourage return of CT permission form**
- **Host a Parent Night: Show the video, distribute the Parent Screening Form, answer questions, dispel myths, provide referral resources**

Parent Permission Issues

- “Feed them and they will come, too!”
- Combine permission form collection with another activity (sports, spring orientation, speaker, etc., with packet of all required forms, next year’s schedule, etc.)
- Rewards/incentives (pizza parties, raffle prizes)
- Testimonial letters of support

COMMUNITY PARTNERING

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COMMUNITY PARTNERS

- Working with the media
- Involving local service clubs (Rotary, Lions, Kiwanis, etc.)
- Second, third and fourth year
 - ❖ Putting a face to suicide
 - ❖ Community resources panel
 - ❖ Booster Program

Why Partner?

- **If a school does not have adequate staff**
- **Students may feel more comfortable speaking with an outsider**
- **As an introduction to community-based mental health resources**
- **Enhance referral network for the school**

DATA

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Evaluation of SOS Program

Two approaches to evaluation
(Aseltine):

Process evaluation: school personnel
program implementation, quality,
numbers, demographics

Outcome evaluation: students,
students' attitudes & behavior

Data: Pre/Post Tests

What changes occur as a result of SOS?

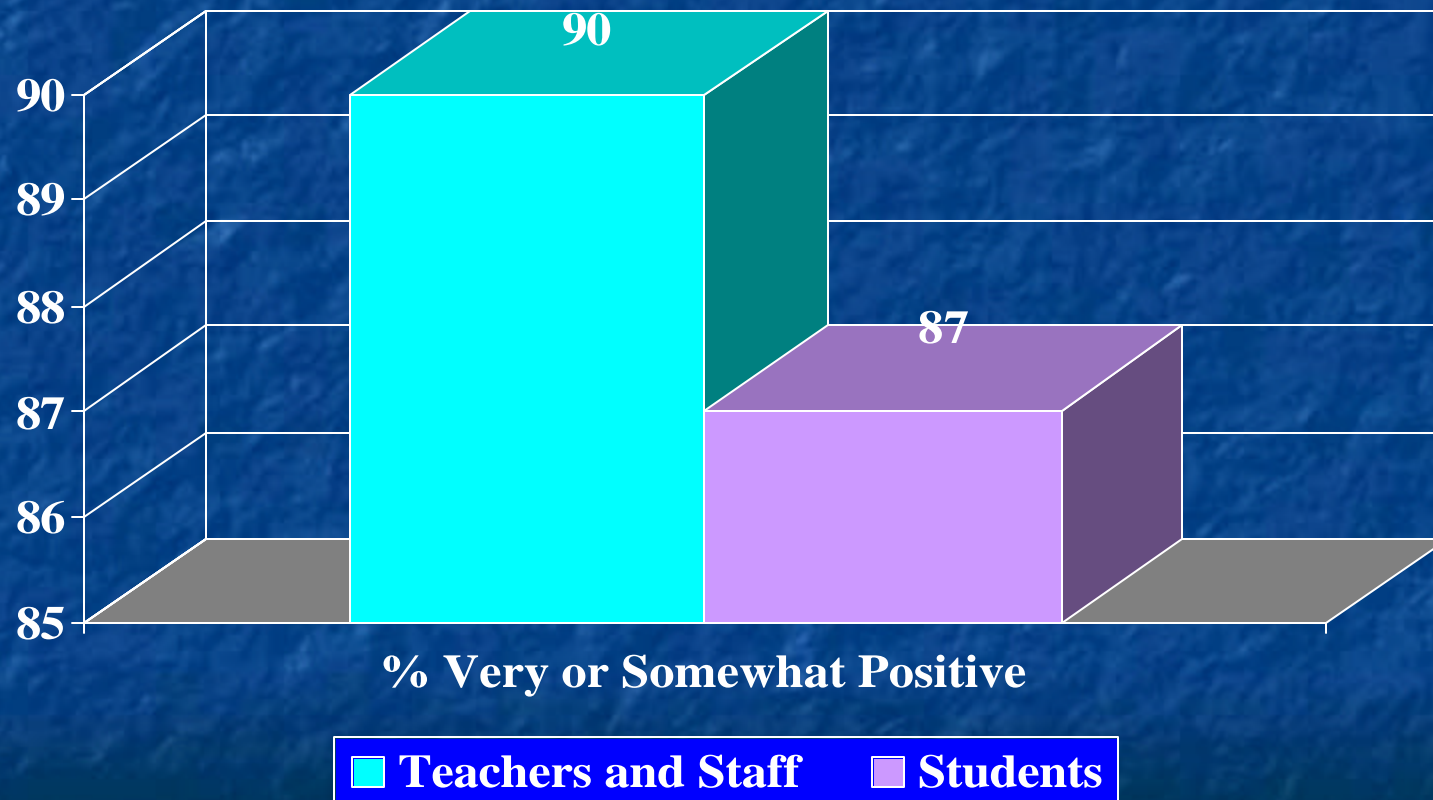
- Attitudes [A]
- Skills [S]
- Knowledge [K]

ASK!

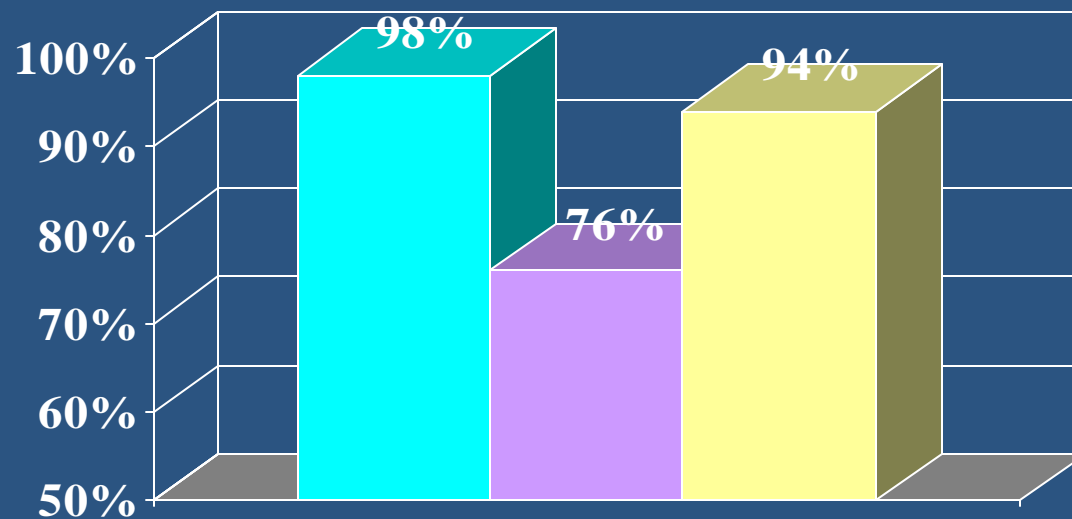
Pre/Post Tests

- What do you want students to BELIEVE that they did not BELIEVE before? [A]
- What SKILL do you want students to possess that they didn't possess before? [S]
- What do you want students to KNOW that they didn't KNOW before? [K]

Overall Reactions to SOS Program

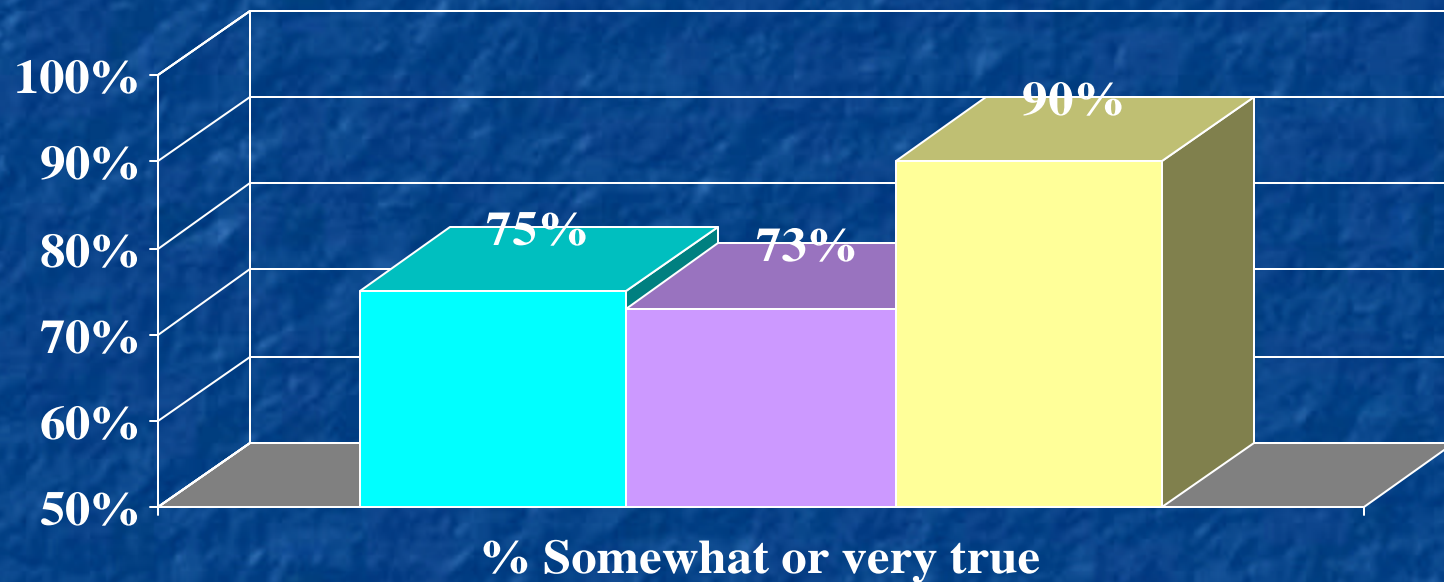


Ability of SOS Program to Improve Communication



- Among Students
- Between Students and Parents
- Between Students and School Personnel

Effects of Program on Help Seeking



- Increased Help Seeking
- Increased help Seeking on behalf of friends
- Brought students in need to school's attention

Examples of the Lasting Effects of ACT

- Matt J. and the shared desk
- ACT across all P/S programs
- Brian and the cereal boxes
- Lyssa and the Chat Room

YOUR SOS PROGRAM

Imaginative
Institutionalized
Implementable

"They want to leave our office feeling fortified, not judged; renewed, not encumbered; opened, not diminished."

Any Bitter Thing by Monica Wood

QUESTIONS?